2016 Advantage Health Plan Rates

100% Employer Contribution

Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
Health Plan	Total	State	Employee	Total	State	Employee	Total	State	Employee
Advantage BlueCross	564.22	536.02	28.20	1094.98	930.74	164.24	1659.20	1466.76	192.44
Advantage HealthPartners	564.22	536.02	28.20	1094.98	930.74	164.24	1659.20	1466.76	192.44
Advantage PreferredOne	564.22	536.02	28.20	1094.98	930.74	164.24	1659.20	1466.76	192.44

75% Employer Contribution

Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
Health Plan	Total	State	Employee	Total	State	Employee	Total	State	Employee
Advantage BlueCross	564.22	402.02	162.20	1094.98	698.06	396.92	1659.20	1100.08	559.12
Advantage HealthPartners	564.22	402.02	162.20	1094.98	698.06	396.92	1659.20	1100.08	559.12
Advantage PreferredOne	564.22	402.02	162.20	1094.98	698.06	396.92	1659.20	1100.08	559.12

50% Employer Contribution

Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
Health Plan	Total	State	Employee	Total	State	Employee	Total	State	Employee
Advantage BlueCross	564.22	268.02	296.20	1094.98	465.38	629.60	1659.20	733.40	925.80
Advantage HealthPartners	564.22	268.02	296.20	1094.98	465.38	629.60	1659.20	733.40	925.80
Advantage PreferredOne	564.22	268.02	296.20	1094.98	465.38	629.60	1659.20	733.40	925.80

0.00% Employer Contribution

Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
Health Plan	Total	State	Employee	Total	State	Employee	Total	State	Employee
Advantage BlueCross	564.22	0	564.22	1094.98	0	1094.98	1659.20	0	1659.20
Advantage HealthPartners	564.22	0	564.22	1094.98	0	1094.98	1659.20	0	1659.20
Advantage PreferredOne	564.22	0	564.22	1094.98	0	1094.98	1659.20	0	1659.20

